HEARTLAND-WASHINGTON MANOR

2100 MACHINGTON DOAD

3100 WASHINGTON ROAD

KENOSHA 53144 Phone: (262) 658-4622 Ownership: Corporation Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? No Title 18 (Medicare) Certified? Number of Beds Set Up and Staffed (12/31/02): 153 Total Licensed Bed Capacity (12/31/02): Title 19 (Medicaid) Certified? 153 Yes Number of Residents on 12/31/02: 122 Average Daily Census: 109

Services Provided to Non-Residents		Length of Stay (12/31/02) %					
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	8	Age Groups	%	Less Than 1 Year	52.5 32.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	13.9	More Than 4 Years	14.8
Day Services	No	Mental Illness (Org./Psy)	14.8	65 - 74	10.7		
Respite Care	No	Mental Illness (Other)	0.8	75 - 84	27.9		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	42.6	********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.8	95 & Over	4.9	Full-Time Equivale	nt
Congregate Meals	No	Cancer	1.6			Nursing Staff per 100 R	esidents
Home Delivered Meals	No	Fractures	8.2			(12/31/02)	
Other Meals	No	Cardiovascular	32.0	65 & Over	86.1		
Transportation	No	Cerebrovascular	18.9			RNs	8.6
Referral Service	No	Diabetes	20.5	Sex	용	LPNs	10.1
Other Services	Yes	Respiratory	1.6			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	0.8	Male	31.1	Aides, & Orderlies	29.6
Mentally Ill	No			Female	68.9		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

		edicare			edicaid			Other			Private Pay	:		amily Care			anaged Care			
Level of Care	No.	olo	Per Diem (\$)	No.	Ŷ	Per Diem (\$)	No.	%	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	୧	Per Diem (\$)	No.	0/0	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	26	100.0	275	77	93.9	101	0	0.0	0	14	100.0	187	0	0.0	0	0	0.0	0	117	95.9
Intermediate				5	6.1	86	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	4.1
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	26	100.0		82	100.0		0	0.0		14	100.0		0	0.0		0	0.0		122	100.0

HEARTLAND-WASHINGTON MANOR

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12	/31/02					
Deaths During Reporting Period												
					% Needing		Total					
Percent Admissions from:		Activities of	90	As	sistance of	% Totally	Number of					
Private Home/No Home Health	8.3	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents					
Private Home/With Home Health	0.0	Bathing	0.0		70.5	29.5	122					
Other Nursing Homes	7.7	Dressing	6.6		72.1	21.3	122					
Acute Care Hospitals	81.3	Transferring	23.0		60.7	16.4	122					
Psych. HospMR/DD Facilities	0.0		17.2			32.8	122					
Rehabilitation Hospitals	1.3	Eating	38.5		54.9	6.6	122					
Other Locations	1.3	* * * * * * * * * * * * * * * * * * *				******	*****					
Total Number of Admissions	300	Continence		%	Special Treatmen	ts	용					
Percent Discharges To:		Indwelling Or Exter:	nal Catheter	5.7	Receiving Resp	iratory Care	11.5					
Private Home/No Home Health	0.3	Occ/Freq. Incontine	nt of Bladder	50.0	Receiving Trac	heostomy Care	0.0					
Private Home/With Home Health	35.4	Occ/Freq. Incontine	nt of Bowel	50.0	Receiving Suct	ioning	1.6					
Other Nursing Homes	4.5	1			Receiving Osto	my Care	4.9					
Acute Care Hospitals	34.7	Mobility			Receiving Tube	Feeding	3.3					
Psych. HospMR/DD Facilities	0.7	Physically Restrain	ed	3.3	Receiving Mech	anically Altered Diet	s 23.0					
Rehabilitation Hospitals	0.0	1				-						
Other Locations	1.7	Skin Care			Other Resident C	haracteristics						
Deaths	22.6	With Pressure Sores		5.7	Have Advance D	irectives	9.8					
otal Number of Discharges		With Rashes		2.5	Medications							
(Including Deaths)	288				Receiving Psyc	hoactive Drugs	53.3					

********	*****	*****	*****	*****	******	****	*****	*****	
	Ownership:			Size:	Lic	ensure:			
This	Pro	prietary	100	-199	Ski	lled	Ali	1	
Facility	Facility Peer Gro		Peer	Group	Peer	Group	Faci	lities	
%	olo	Ratio	%	Ratio	%	Ratio	96	Ratio	
71.2	84.7	0.84	85.7	0.83	85.3	0.83	85.1	0.84	
58.2	81.6	0.71	81.9	0.71	81.5	0.71	76.6	0.76	
9.3	17.8	0.53	20.1	0.47	20.4	0.46	20.3	0.46	
275.2	184.4	1.49	162.5	1.69	146.1	1.88	133.4	2.06	
264.2	183.9	1.44	161.6	1.64	147.5	1.79	135.3	1.95	
94.5	84.7	1.12	70.3	1.34	63.3	1.49	56.6	1.67	
95.9	93.2	1.03	93.4	1.03	92.4	1.04	86.3	1.11	
86.1	92.7	0.93	91.9	0.94	92.0	0.94	87.7	0.98	
67.2	62.8	1.07	63.8	1.05	63.6	1.06	67.5	1.00	
11.5	21.6	0.53	22.1	0.52	24.0	0.48	21.0	0.55	
0.0	0.8	0.00	0.9	0.00	1.2	0.00	7.1	0.00	
15.6	29.3	0.53	37.0	0.42	36.2	0.43	33.3	0.47	
0.8	24.7	0.03	21.0	0.04	22.5	0.04	20.5	0.04	
52.3	48.5	1.08	49.2	1.06	49.3	1.06	49.3	1.06	
53.3	52.3	1.02	53.2	1.00	54.7	0.97	54.0	0.99	
6.6	6.8	0.97	6.9	0.95	6.7	0.97	7.2	0.91	
	This Facility % 71.2 58.2 9.3 275.2 264.2 94.5 95.9 86.1 67.2 11.5 0.0 15.6 0.8 52.3 53.3	Own This Pro Facility Peer % 71.2 84.7 58.2 81.6 9.3 17.8 275.2 184.4 264.2 183.9 94.5 84.7 95.9 93.2 86.1 92.7 67.2 62.8 11.5 21.6 0.0 0.8 15.6 29.3 0.8 24.7 52.3 48.5 53.3 52.3	Ownership: Proprietary Facility Reer Group Ratio 71.2 84.7 0.84 58.2 81.6 0.71 9.3 17.8 0.53 275.2 184.4 1.49 264.2 183.9 1.44 94.5 84.7 1.12 95.9 93.2 1.03 86.1 92.7 0.93 67.2 62.8 1.07 11.5 21.6 0.53 0.0 0.8 0.00 15.6 29.3 0.53 0.8 24.7 0.03 52.3 48.5 1.08 53.3 52.3 1.02	Ownership: Bed This Proprietary 100 Facility Peer Group Peer % Ratio % 71.2 84.7 0.84 85.7 58.2 81.6 0.71 81.9 9.3 17.8 0.53 20.1 275.2 184.4 1.49 162.5 264.2 183.9 1.44 161.6 94.5 84.7 1.12 70.3 95.9 93.2 1.03 93.4 86.1 92.7 0.93 91.9 67.2 62.8 1.07 63.8 11.5 21.6 0.53 22.1 0.0 0.8 0.00 0.9 15.6 29.3 0.53 37.0 0.8 24.7 0.03 21.0 52.3 48.5 1.08 49.2 53.3 52.3 1.02 53.2	Ownership: Bed Size: This Proprietary 100-199 Facility Peer Group Ratio 71.2 84.7 0.84 85.7 0.83 58.2 81.6 0.71 81.9 0.71 9.3 17.8 0.53 20.1 0.47 275.2 184.4 1.49 162.5 1.69 264.2 183.9 1.44 161.6 1.64 94.5 84.7 1.12 70.3 1.34 95.9 93.2 1.03 93.4 1.03 86.1 92.7 0.93 91.9 0.94 67.2 62.8 1.07 63.8 1.05 11.5 21.6 0.53 22.1 0.52 0.0 0.8 0.00 0.9 0.00 15.6 29.3 0.53 37.0 0.42 0.8 24.7 0.03 21.0 0.04 52.3 48.5 1.08 49.2 1.06 53.3 52.3 1.02 53.2 1.00	Ownership: Bed Size: Lic This Proprietary 100-199 Ski Facility Peer Group Peer Group Peer Group % Ratio % Ratio % 71.2 84.7 0.84 85.7 0.83 85.3 85.3 58.2 81.6 0.71 81.9 0.71 81.5 9.3 17.8 0.53 20.1 0.47 20.4 275.2 184.4 1.49 162.5 1.69 146.1 264.2 183.9 1.44 161.6 1.64 147.5 94.5 84.7 1.12 70.3 1.34 63.3 95.9 93.2 1.03 93.4 1.03 92.4 86.1 92.7 0.93 91.9 0.94 92.0 67.2 62.8 1.07 63.8 1.05 63.6 11.5 21.6 0.53 22.1 0.52 24.0 0.0 0.0 0.8 0.00 0.9 0.00 1.2 15.6 29.3 0.53 37.0 0.42 36.2 0.8 24.7 0.03 21.0 0.04 22.5 52.3 48.5 1.08 49.2 1.06 49.3 53.3 52.3 1.02 53.2 1.00 54.7	Ownership: Bed Size: Licensure: This Proprietary 100-199 Skilled Facility Peer Group Peer Group Peer Group % Ratio Ratio % Ratio 71.2 84.7 0.84 85.7 0.83 85.3 0.83 58.2 81.6 0.71 81.9 0.71 81.5 0.71 9.3 17.8 0.53 20.1 0.47 20.4 0.46 275.2 184.4 1.49 162.5 1.69 146.1 1.88 264.2 183.9 1.44 161.6 1.64 147.5 1.79 94.5 84.7 1.12 70.3 1.34 63.3 1.49 95.9 93.2 1.03 93.4 1.03 92.4 1.04 86.1 92.7 0.93 91.9 0.94 92.0 0.94 67.2 62.8 1.07 63.8 1.05 63.6 1.06	This Proprietary 100-199 Skilled Al. Facility Peer Group Peer Group Peer Group Facility Ratio % Ratio	